

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

FEB 28 2008

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

22883 7590 01/25/2008

SWERNOFSKY LAW GROUP PC
P.O. BOX 390013
MOUNTAIN VIEW, CA 94039-0013

02/28/2008 HDESTA2 00000023 09620826

01 FC:2501 720.00 OP
02 FC:8001 9.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<i>ODDIE STONE</i>	
(Depositor's name)	
<i>2/26/08</i>	
(Signature)	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/620,826 07/21/2000 Reza Majidi-Ahy 164.1017.01 4409

TITLE OF INVENTION: INTEGRATED, SELF-OPTIMIZING, MULTI-PARAMETER/MULTI-VARIABLE POINT-TO-MULTIPOINT COMMUNICATION SYSTEM [II]

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$0	\$0	\$720	04/25/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
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JONES, PRENELL P 2619 370-329000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<i>1 Swernofsky Law Group PC</i>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<input type="checkbox"/> 2 _____
	<input type="checkbox"/> 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Aperto Networks, Inc.

Milpitas, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies *Three (3)*

A check is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number *50-0365* (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

SASwernofsky

Date *2-26-2008*

Typed or printed name

STEVEN SWERNOFSKY

Registration No. *33,040*

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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22883

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 729.00)

Complete if Known

Application Number	09/620,826
Filing Date	7/21/2000
First Named Inventor	Majidi-Ahy, et al.
Examiner Name	Jones, P.
Art Unit	2619
Attorney Docket No.	164.1017.01

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None

 Deposit Account

Deposit Account Number

50-0365

Deposit Account Name

Swernofsky Law Group PC

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments

 Charge any additional fee(s) or any underpayment of fee(s)

 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	500	2452	250	Petition to revive – unavoidable	
1453	1,500	2453	750	Petition to revive – unintentional	
1501	1,400	2501	720	Utility issue fee (or reissue)	\$720.00
1502	800	2502	400	Design issue fee	
1503	1,100	2503	550	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Large Entity	Small Entity	Fee from below	Fee Paid
Total Claims	-20**=	X	=
Independent Claims	- 3**=	X	=
Multiple Dependent			=

Large Entity	Small Entity	Fee Description
1202	50	2202 25 Claims in excess of 20
1201	200	2201 100 Independent claims in excess of 3
1203	360	2203 180 Multiple dependent claim, if not paid
1204	200	2204 100 **Reissue independent claims over original patent
1205	50	2205 25 **Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

** or number previously paid, if greater; For Reissues, see above

Other fee (specify) 8001 Patent Copies (3)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 729.00)

\$9.00

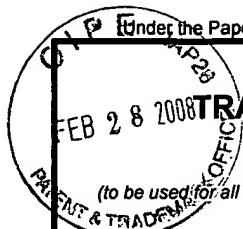
SUBMITTED BY		Complete if applicable		
Name (Print/Type)	Steven A. Swernofsky	Registration No. (Attorney/Agent)	33,040	Telephone 650-947-0700
Signature	Swernofsky			Date 2-26-2008

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	09/620,826
		Filing Date	Jul 21, 2000
		First Named Inventor	Majidi-Ahy, Reza
		Art Unit	2619
		Examiner Name	Jones, P.
Total Number of Pages in This Submission	7	Attorney Docket Number	164.1017.01

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (2 copies) <input checked="" type="checkbox"/> Fee Attached (Check #031711 \$729.00 dated 2/14/08) <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Part B – Fee(s) Transmittal (2 copies) Transmittal of Issue Fees Letter Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

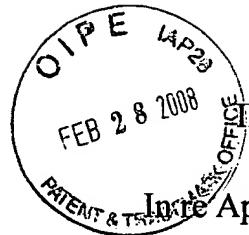
Firm or Individual name	Steven A. Swernofsky	Reg. No. 33,040
Signature		
Date	2-26-2008	

CERTIFICATE OF TRANSMISSION/MAILING

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Type or printed name	
Signature	
	Date 2/26/08

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Majidi-Ahy

Serial No. 09/620,826

Filed: 7/21/2000

For: Integrated, Self-Optimizing,
 Multi-Parameter/Multi-Variable
 Point-to-Multipoint
 Communication System [II]

Art Unit: 2619

Examiner: Jones, P.

CERTIFICATE OF MAILING

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on 2/26/08 by 
 Date Name

TRANSMITTAL OF ISSUE FEE

Honorable Commissioner
 for Patents
 MAIL STOP ISSUE FEE
 Alexandria, VA 22313-1450

Dear Sir:

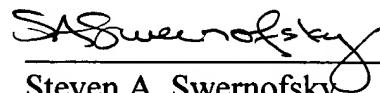
With respect to the above-identified patent application, enclosed herewith for filing are the following:

1. Part B —Fee(s) Transmittal (2 copies);
2. Fee Transmittal Form SB/17 (2 copies); and

3. Check in the amount of \$729.00 for payment of the Issue Fee
(\$720.00) and for three (3) copies of the printed patent (\$9.00).

Respectfully submitted,

Dated: 2-26-2008



Steven A. Swernofsky
Reg. No. 33,040

Swernofsky Law Group
P.O. Box 390013
Mountain View, CA 94039-0013
(650) 947-0700